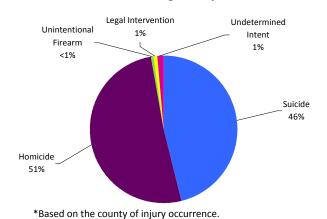


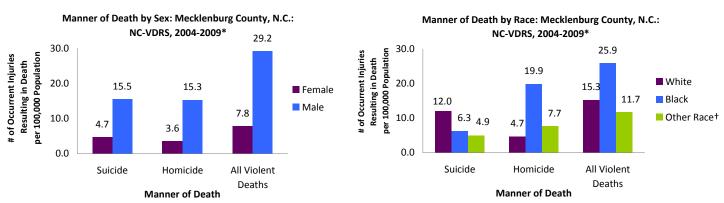
VIOLENT DEATH IN NORTH CAROLINA: MECKLENBURG COUNTY INCIDENTS: 2004-2009

The North Carolina Violent Death Reporting System (NC-VDRS) is a CDC-funded state-wide surveillance system that collects detailed information on deaths that occur in North Carolina resulting from violence: homicide, suicide, unintentional firearm deaths, legal intervention, and deaths for which intent could not be determined. NC-VDRS is a multi-source system that gathers information from death certificates, medical examiner reports, and law enforcement reports. The goal of this system is to aid researchers, legislators, and community interest groups in the development of public health prevention strategies to reduce violent deaths. All deaths reported in this document are based on location of *occurrence* rather than residence and, instead of a rate, the ocurrent ratio is reported. This statistic is derived from the total number of violent deaths resulting from injuries in a specified geographic region divided by the number of residents in this region. This document summarizes all fatal injuries from violence that occurred in Mecklenburg County for the years 2004 through 2009.

Manner of Death: Mecklenburg County, N.C.: NC-VDRS, 2004-2009*



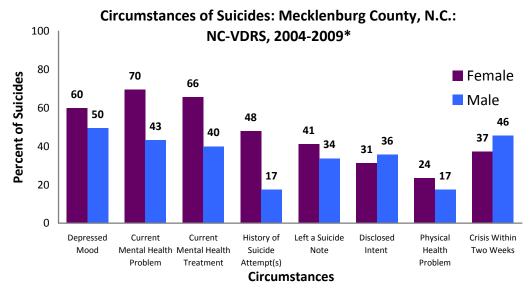
- For the years 2004-2009, there were 929 violent deaths from injuries sustained in Mecklenburg County. Of these 929 deaths, 885 were North Carolina residents (95 %) and 837 were Mecklenburg County residents (90 %).
- There were 474 homicides (51 %), 429 suicides (46 %), nine deaths from legal interventions (1 %), five unintentional firearm deaths (<1 %), and 12 deaths of undetermined intent (1 %).
- In Mecklenburg County, the suicide ratio was 3.3 times higher in males than females, and the homicide ratio was 4.3 times higher in males than females.
- Patterns of suicide and homicide differed by race. Suicide victims were more likely to be white than black. Whites had 12.0 suicides per 100,000 population versus 6.3 suicides per 100,000 population in blacks. The 'Other Race' category had 10 suicides.
- In contrast, blacks had 19.9 homicides per 100,000 population as opposed to whites who had 4.7 homicides per 100,000 population. The 'Other Race' category had 19 homicides.



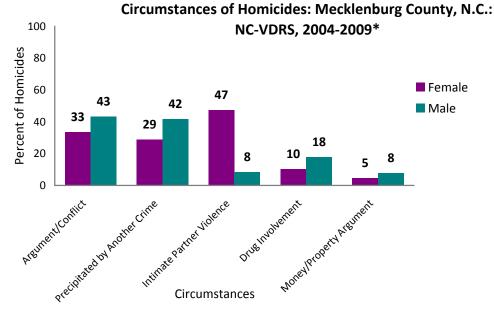
^{*}Based on the county of injury occurrence.

[†]Other race refers to American Indians, Asians, etc. Rates might be unstable due to small number of deaths.

- Suicides and homicides displayed dissimilar age patterns. Homicides peaked in the 20-24 year age group with a smaller peak in infancy. Suicides increased with age and peaked in those 85 and older.
- Most homicides (77 %) and suicides (52 %) were committed using firearms.
- Suspicion of intoxication was reported in 32 percent of homicides and 37 percent of suicides.
- For homicide incidents where one or more suspects were identified, the relationship of the victim to the suspect was known (current or former spouse/boyfriend/girlfriend, family, friend or acquaintance) more frequently for female (76 %) than male (47 %) victims.



*Based on the county of injury occurrence. Ninety-four percent of males and 98 percent of females had circumstance information.



*Based on the county of injury occurrence. Eighty-seven percent of males and 94 percent of females had circumstance information.

- Fifty-two percent of Mecklenburg County suicides with circumstance information were characterized as being currently depressed.
- Seventy percent of female victims and 43 percent of male victims were characterized as having a current mental health problem.
- Females (48 %) were more likely to have attempted suicide in the past compared to males (17 %).
- Arguments or conflicts were more likely to be a contributing factor for male homicides (43 %) than female homicides (33%).
- Twenty-nine percent of female homicides and 42 percent of male homicides were precipitated by another crime such as robbery, burglary or drug trafficking.
- Intimate partner violence was a contributing factor in 47 percent of female homicides, but only eight percent of male homicides.

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N.C. Division of Public Health / www.publichealth.nc.gov / Injury Epidemiology & Surveillance Unit/ 919-707-5425

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